

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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CORPORATION
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE

Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED

02 NOV 21 PM 12:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000095764

1. Corporation Name

SAMPLECHOICE.COM, INC

2. Principal Office Address

6151 MIRAMAR PKWAY

Suite, Apt. #, etc.

202

City & State

MIRAMAR

Zip

33023

Country

USA

3. Mailing Office Address

(same)

Suite, Apt. #, etc.

(same)

City & State

(same)

Zip

same

Country

same

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐\$3.75 Additional Fee required
for a Certificate of Status

000009352620

12/04/02--01065--019 **150.00

7. Name and Address of Current Registered Agent

Name

RYAN LIVINGSTON

Street Address (P.O. Box Number is Not Acceptable)

420 NW 131 ST.

Suite, Apt. #, Etc.

PJT. House

City

MIAMI

State

FL

Zip Code

33168

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0506 or 617.0503, F.S.

Signature of
Registered Agent

Ryan Livingston

REGISTERED AGENT MUST SIGN

Date 11/20/02

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Pres.	RYAN LIVINGSTON	420 NW. 131 ST.	MIAMI, FL 33168
Partner	TYRONE LIVINGSTON	6151 MIRAMAR PKWAY	MIRAMAR, FL 33023

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Ryan Livingston

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/20/02 954-961-0028

Date

Daytime Phone #

CORP-1 (2001)

November 20, 2002

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RE: SAMPLECHOICE.COM, INC.

To Whom It May Concern:

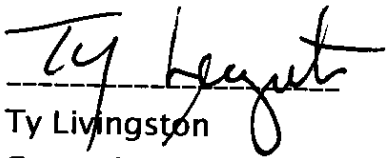
I am requesting a waiver of the usual fees that are associated with the reinstatement of corporate papers due to the fact that we (Samplechoice.com, Inc.) were not in receipt of the annual corporate papers for renewal for 2001.

Enclosed, you shall find our payment totaling \$300 in the following form:

- Money Order in the amount of \$150
- Check #2352 in the amount of \$150

Thanking you in advance for your immediate attention with this matter.

Respectfully,



Ty Livingston
General Partner